

Los Angeles County Board of Supervisors

TO:

July 28, 2014

Each Supervisor

Mark Ridley-Thomas

FROM:

Mitchell H. Katz, M.D.

Director

Zev Yaroslavsky

Gloria Molina
First District

Second District

Don Knabe

Fourth District

Third District SUBJECT:

ANALYSIS OF FEDERAL LEGISLATION THAT

COULD LAY THE GROUNDWORK FOR

PARTNERSHIP BETWEEN LOS ANGELES COUNTY

and

AND THE U.S. DEPARTMENT OF VETERANS

AFFAIRS (ITEM NO. 67-B, JUNE 17, 2014 AGENDA)

Michael D. Antonovich
Fifth District

Mitchell H. Katz, M.D.

Director

Hal F. Yee, Jr., M.D., Ph.D. Chief Medical Officer

Christina R. Ghaly, M.D. Deputy Director, Strategic Planning On June 17, 2014, the Board instructed the Chief Executive Officer (CEO) to work with the Department of Health Services (DHS) to analyze H.R. 4810, H.R. 3230, or similar Federal legislation, which could lay the groundwork for an expanded partnership between Los Angeles County and the U.S. Department of Veterans Affairs to provide health care to veterans, and report back in 30 days.

Federal Legislation

In response to this motion, the CEO and DHS completed an analysis of the impact that the proposed legislation would have on this department. The Veteran Access to Care Act of 2014 (H.R. 4810) directs the Secretary of Veterans Affairs (VA) to enter into contracts with non-VA facilities as may be necessary to furnish hospital care and medical services to veterans who: have waited longer than the waittime goals of the Veterans Health Administration (VHA) for an appointment for hospital care or medical services in a VA facility; have been notified by a VA facility that an appointment for hospital care or medical services is not available within such wait-time goals; or reside more than 40 miles from the VA medical facility, including a community-based outpatient clinic, that is closest to their residence. The Veterans' Access to Care through Choice, Accountability, and Transparency Act of 2014 (H.R. 3230) was passed by the Senate and differs from H.R. 4810. A key difference between H.R. 4810 and H.R. 3230 is that the added cost of providing health care to all veterans within the two- week wait-time goals would be mandatory spending in H.R. 3230. In the House-passed bill, H.R. 4810, the added cost of providing health care to all veterans within the two-week wait-time goals would be discretionary spending, which means the cost would be subject to available appropriations.

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To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.



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Past Partnership

Rancho Los Amigos National Rehabilitation Center (RLANRC) and the VA established a relationship for referrals via an Indefinite Delivery/Indefinite Quantity (IDIQ) contract from June 2010 to December 2011. During that time, RLANRC established a robust outpatient program as requested by the VA and was able to provide services within two weeks of the request for the contract. RLANRC notes that the veterans that received services expressed their satisfaction with the personalized approach to their care, individualized interventions focused on their specific problem versus a generalized generic program, and timely access to services. RLANRC has expressed strong interest in continuing the partnership and is able to customize its programs to meet the needs of veterans. Despite the successful outcomes and numerous attempts by DHS to renew the contract, the VA determined that the Veterans Integrated Service Network 22 (VISN 22) had sufficient capacity and did not need to continue contracting for services offered at RLANRC.

In addition to RLANRC, other parts of the DHS system could also be made available depending on existing capacity and the specific needs of the veterans to be served. For example, LAC+USC Medical Center has select services, such as Oncology and Obstetrical and Gynecological services that could receive additional referrals if needed by the VA.

Should the legislation be enacted and if the VA seeks to contract for services, DHS is ready to once again enter into an agreement and partnership to provide high quality inpatient acute rehabilitation care and specialized outpatient services to veterans. If we can provide any additional information, please feel free to contact me.

MHK:GP:tf

c: Chief Executive Office County Counsel Executive Office, Board of Supervisors